

Exhibit O



TEXAS

Health and Human Services

Child-Care Inspection Form

Southwest Key Programs, Inc - Casa Sunzal
#1681306

Arrival Date and Time 10/10/2018 01:00 PM
Departure Date and Time 10/10/2018 02:25 PM

Part I: OPERATION INFORMATION

Location: 419 EMANCIPATION AVE, HOUSTON, TX 77003 Phone: (713) 962-3427
 Permit Type:
 Type: Child Care Services Only Capacity:
 Status: Applicant
 Director/Administrator: Marisela Saldana Designee/Registrant: Juan Sanchez
 Director/Administrator:
 Type of Inspection: Unannounced Application

Licensing Staff: DOMANIQUE VITAL Phone:
 Address: 1425 E 40TH ST , HOUSTON, TX 77022

Licensing Supervisor: ALICIA COURTNEY Phone: (713) 696-3623
 Address: 1425 E 40TH ST , HOUSTON, TX 77022

Part II: NOTIFICATION

- Controlling Persons have been verified.
- Background checks have been verified.
- Children in Care: 0

All or part of the following laws, administrative rules or Minimum Standard rules have been inspected:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Standard x Standard | <input type="checkbox"/> L.Medication |
| <input type="checkbox"/> B.Definitions and Services | <input type="checkbox"/> M.Discipline and Punishment |
| <input type="checkbox"/> C. Organization and Administration | <input type="checkbox"/> N.Emergency Behavior Intervention |
| <input type="checkbox"/> D.Reports and Record Keeping | <input type="checkbox"/> O.Safety and Emergency Practices |
| <input type="checkbox"/> E.Personnel | <input type="checkbox"/> P.Physical Site |
| <input type="checkbox"/> F.Training and Professional Development | <input type="checkbox"/> Q.Recreation Activities |
| <input type="checkbox"/> G.Child/Caregiver Ratios | <input type="checkbox"/> R.Transportation |
| <input type="checkbox"/> H.Children's Rights | <input type="checkbox"/> S.Emergency Care |
| <input type="checkbox"/> I.Admission, Service Planning,Discharge | <input type="checkbox"/> T. Assessment Services - Additional Requirements |
| <input type="checkbox"/> J.Child Care | <input type="checkbox"/> U. Therapeutic Camp Services - Additional Requirements |
| <input type="checkbox"/> K.Providing Children and Adult Care | <input type="checkbox"/> TAC 745-Drug Testing |

Others:



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Failure to maintain compliance on an ongoing basis may result in enforcement actions

In an effort to improve our inspection process, we are soliciting your feedback about this licensing inspection at your operation. Please provide responses to the questions posed in the online survey. The survey will take approximately 5-10 minutes to complete. Go to www.CCLinspectionfeedback.org. Your answers and comments are greatly appreciated.

ACKNOWLEDGEMENT OF RECEIPT

An inspection was conducted at my operation on the date below. Deficiencies and, where applicable, technical assistance were discussed with me during the exit conference. Failure to comply within the specified time limit or repetition of deficiencies may result in remedial action without further opportunity to correct the deficiencies. I understand that if the results of this inspection were not given to me on this date, they will be sent through a supplemental letter within ten days of this inspection.

A handwritten signature in black ink, appearing to read "M. Miller".

10/10/2018

A handwritten signature in black ink, appearing to read "Dawn J. Parker".

10/10/2018

Signature (Person Signing for Operation)

Date

Signature (Licensing Staff)

Date

Signed By: Administrator

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Part III: INSPECTION INFORMATION

Records Evaluated:

Number of Children's Records:

Number of Children Enrolled:

Number of Maternity Home Residents:

Number of Homes:

Number of Birth Parents:

Number of Serious Incidents:

Number of Staff Records:

Number of Staff Employed:

Inspection Dates:

Fire Inspection:

Health Inspection:

Liability Insurance (exp.date)

Gas Pipe Pressure Test:

Last LP Gas Inspection :

Findings for this inspection are listed below:

Standard/Rule Description	Specifics	Findings	Comply By	TA Given
748.3101(1) Fire Inspection-Must have fire inspection before initial permit issued (Weight: Medium High)	Based on the information we have received from the city of Houston, the fire permit is not valid.	Deficiency	11/10/2018	N

Notification Date: 10/10/2018

If you disagree with the actions or decisions of the licensing staff, you may request an administrative review within 15 days of the receipt of this inspection report by writing the Licensing Supervisor.



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Providers may comment on the findings of the inspection in the space below.
